PTO/SB/08 (12-04)
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PATEN	794	ation or Docket N	969						
APPL	SMALL E	NTITY	OR	OTHER THAN R SMALL ENTITY					
FOR	NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
BASIC FEE (37 CFR 1.16(a), (b), or (c))					1				
SEARCH FEE					1		†		
(37-CFR 1.16(k), (i), or (m)) EXAMINATION FEE (37-CFR 1.16(o), (p), or (q))									
TOTAL CLAIMS (37 CFR 1.16(I))	minus 20 =	•	×25=		OR	×50 =			
INDEPENDENT CLAIMS (37 CFR 1.16(h)) minus 3			×100 =	,		× 200 =	 		
APPLICATION SIZE FEE (37 CFR 1.16(a))				× 200 0 =	·				
MULTIPLE DEPENDENT	180			360					
* If the difference in column	TOTAL			TOTAL					
APPLICATION AS AMENDED - PART II									
, (C	SMALL E	NTITY .	OR	OTHER SMALL					
4 2116107 RE	MAINING H PR	IIGHEST IUMBER PRESENT EVIOUSLY EXTRA AID FOR	RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)		
☐ Total :	37 Minus "	BB 10	x25=	. 1	OR	×50 =			
Total (ar ora 1.1e(n)) Independent (ar ora 1.1e(n)) Application Size Fee	4 Minus ***	19 - (1)	×100 =		OR	×200 =	7		
Application Size Fee	(37 OFR 1.16(s))				O.				
FIRST PRESENTATION	180	.	OR	360					
	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE					
ox andt	olumn 1)	(Column 2) (Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0	AUDITEE	· · · · · ·		
2	CLAIMS H	IIGHEST	<u> </u>						
2 '1 6 0' .	MAINING AFTER PRENDMENT P	IUMBER PRESENT EVIOUSLY EXTRA AID FOR	RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$) /		
☐ Total * (27 CFR 1.16(0))	Minus "	me/" /	×25 .		OR	×50 =	/		
	Minus ***	3000 = /	x 100 =		OR	×200=			
Application Size Fee	(37 CFR 1.16(s))				. 010		_/_		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18())			180		OR	360	//		
-		1	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 									

The Highest Number Previously Paid For (10tal or independent) is the nignest number round in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Effective October 1, 2000 9/11/1969									69			
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY OTHER T						
TOTAL CLAIMS		89					RATE	FEE	٦٣	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FE			BASIC FE		
TOTAL CHARGEABLE CLAIMS		ninus 20=		. 68		1	X\$ 9=		7			
INDEPENDENT CLAIMS		19 minus 3 =		•	6	1					1224	
MULTIPLE DEPENDENT CLAIM PRESENT						1	X40=	 	OR	X80=	1280	
* If the difference in column 1 is less than zero, enter "0" in column 2				" [+135=		OR	+270=				
						TOTAL		OR	TOTAL	321 4		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL ENTITY OR SMALL ENTITY					
4	CLAIMS REMAINING		HIGH	EST	(Column 3)	1 6	OMACE	ADDI-	OR 7	SMALL		
WENT	AFTER MENOMENT		PREVIO PAID I	USLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	- \ \\\	Minus		38			X\$ 9=		OR	X\$18=		
Independent •		Minus	PENDENT	CLAIM	=	ł[X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					' [+135=		OR	+270=			
6/6/05					L	TOTAL DDIT, FEE			YOYAL			
والاالع	Column 1)		(Colum	n 2)	(Column 3)		DUII. FEE			ADDIT. FEE		
5	CLAIMS EMAINING AFTER MENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total .	////	Minus	al	W	- /	lΓ	X\$ 9=		OR	X\$18=		
FIRST PRESENTATION		Vinus	ENDENT!		= /		X40=		OR	X80=	/	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	٢	OR	+270=		
						_	TOTAL			TOTAL		
148/05 10	olumn 1)		(Column	n 2) (Column 3)	AU	OIT. FEE		O'' A	ODIT. FEE		
O RE	CLAIMS EMAINING AFTER ENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ſ	RATE	ADDI- TIONAL FEE	
Total •		linus	·· 88	3		5	(\$ 9=		OR	X\$18=		
Independent •		linus	19		. /	1	(40=			X80=	/ 	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						105		OR	/ 1			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.					Ľ	135= YOTAL			+270 /			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.												
FORM PTO-875												

Application or Docket Number